Introduction Population Health Improvement Plan and Guide

Population Health Improvement and the Military Health System (MHS) Optimization Plan

The Military Health System (MHS) is a large and unique integrated health system. Like all health systems, the MHS must continually improve health services while effectively managing limited resources. To this end, the MHS Optimization Plan (http://www.tricare.osd.mil/ mhsoptplan/optim/ MHSOT optim.html) was drafted to outline the key tasks that, if coordinated and integrated, will improve the quality and cost-effectiveness of services provided by the MHS. A cornerstone of the Optimization Plan is its focus on population health. The population health imperative is to develop and implement a plan and model to "optimize clinical outcomes across the MHS" and improve health by shifting from an emphasis on disease and injury intervention to prevention and health promotion. The targets for population health initiatives include all

members of the military community; Active Duty, Guard and Reserve Forces and their families, and military retirees and their families.

This plan and guide provides the conceptual framework for improving the health of populations and will guide users to specific actions and tools that will help to build healthy communities. It also provides guidance in support of a uniform health care system based on systematic clinical and business decision processes. The PHI Plan and Guide is not intended to include every detail required for successful implementation. Rather it is intended to provide guiding principles, key processes, tools and resources that can be used in developing the population health improvement strategies and programs necessary for successful Service and MTF implementation.

How to Use This Plan & Guide

The Population Health Improvement (PHI) Plan and Guide will be useful to each user in a unique way. The following descriptions of the sections in the Plan will help readers easily identify those sections that they want to use now and those sections they may use at another time. For example, personnel involved in traditional clinical care may immediately benefit by first reading Section IV and reading Section I after they have assimilated the content in Section IV. Leaders and staff responsible for plans, programs and resources at Headquarters, Service intermediate commands, Regional Lead Agent offices, and Military Treatment Facilities (MTFs) will benefit from the strategic concepts and tactical principles presented in Section I. All readers will enjoy the text boxes that use smoking as a major health issue to exemplify the principles and processes presented.

Boxes like this one are used throughout the Plan to elucidate how the many principles and processes presented can be applied to an important health issue.



Smoking rates among military personnel continue to be high compared to the overall population. Smoking is the leading cause of preventable mortality in the United States. Given the huge burden of smoking-related morbidity and mortality, it is reasonable to assume that smoking is a major factor in many of the health problems that will be addressed by MHS programs. There-

fore, smoking is an appropriate issue to use for demonstrating the application of principles and processes of population health improvement presented in this document.

The picture that accompanies the examples for smoking as a population health problem is from the painting titled Skull and Burning Cigarette. Vincent van Gogh painted the picture in 1885, roughly eighty years before release of the first U.S. Surgeon General's report on smoking.

Summary of the Sections

Section I. Overview of Population Health Improvement

The overview provides a conceptual framework for population health improvement from planning through performance monitoring and improvement. This framework incorporates the processes used by well managed and forward thinking health plans and of public health programs. Population heath and population health improvement are defined and a discussion of those factors, or determinants, that impact health is presented. The overview provides an academic and a strategic discussion of population health improvement in the Military Health System and introduces four principles for improving the health of military communities:

- 1. Define the populations targeted for interventions
- 2. Use applied epidemiology
- 3. Use evidence-based clinical and business interventions, and
- 4. Manage information to support ongoing health status assessment, planning, and performance monitoring and improvement

The following sections provide readers a more detailed "how to" guide for tasks for population health improvement.

Section II. Force Health Protection

Population health improvement activities will directly support the military mission. Force Health Protection doctrine describes these activities in three parts, or pillars; healthy and fit force, casualty prevention and casualty care and management. Whether targeting troops "in garrison" or forces in operational and deployed status, population health improvement principles can be applied. Section II provides an introduction to the three pillars of Force Health Protection in the context of population health improvement.

Section III. Worksite and Community-Based Programs

Worksite and community-based programs include many activities that occur outside traditional health care settings. They can be ideal settings for a number of health-impacting initiatives. This section outlines worksite and community-based programs that should be included in MHS population health improvement strategies. Resources for existing programs in the three Services are identified as well.

Section IV. Health Plan: Military Treatment Facility Implementation Guide

The Military Health System's greatest impact on the health of populations will result from a shift in emphasis from interventional (individual) to preventive (population-based) services in MTFs, combined with worksite and community-based prevention and wellness programs. This section provides definitions and detailed discussions of the seven key process elements of population health improvement that have been identified for implementation throughout the MHS. The seven key process elements are:

- 1. Identify the population
- 2. Forecast demand
- 3. Manage demand
- 4. Manage capacity
- 5. Evidence-based primary, secondary & tertiary prevention
- 6. Community outreach
- 7. Analyze performance and health status

Military Treatment Facilities are targeted in Section IV as leverage points for making this critical shift in emphasis through implementation of population-based processes for delivering the TRICARE benefit and other services. Section IV also includes examples of tools and programs that support population health improvement activities at the MTE.

Section V. Regional Lead Agent Population Health Offices

Regional Lead Agent offices provide support through geographic alignment of MTFs and can directly support MTFs in population health initiatives. This section provides a framework for the evolving role of these offices to support population health improvement and outlines the functions and infrastructure needed to support MTFs and Managed Care Support Contractors and collaborate on MHS population health initiatives.

Section VI. MHS Optimization and Population Health Support Center (OPHSC)

This section describes the functions and structure of the MHS OPHSC that is being developed to support Regional Lead Agent, Service Headquarters, Service intermediate command, and MTF population health offices and clinic teams. Until the MHS OPHSC is fully operational, questions and comments about the principles, processes, tools and resources in the PHI Plan and Guide can be communicated to the contacts at http://www.tricare.osd.mil/opt_int/PHIT_Member.htm.

Section VII. Tables of Population Health Functions and Tools

Tables are provided to serve as a quick reference to the functions associated with the key process elements of population health improvement, to tools that support each process element, and to points of contact for further information.

Guidance for Accessing Internet Sites and Other Resources

There are numerous Internet links and resource offices referenced throughout this document. Every effort will be made to ensure the current Internet addresses and resource contacts are provided. If an Internet site is not opened by clicking on the link in the text, copy the address and paste it into the address window of your Internet browser. Please call the MHS Optimization and Population Health Support Office at (703) 681-3637 (DSN 761) if any of the offices, Internet sites or references cannot be contacted with the information that has been provided.

Text Boxes

Text boxes are used throughout the Plan to provide examples that further explain principles and processes and to present information that augments the main